

## Application Data Sheet

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: METHOD AND ARRANGEMENT FOR  
PROCESSING MEASUREMENT DATA  
Attorney Docket Number:: 3502-1006  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 5  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent No  
Appl.?::

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FINLAND  
Status:: Full Capacity  
Given Name:: JUHA  
Middle Name::  
Family Name:: KARUNEN  
City of Residence::  
State or Province of  
Residence::  
Country of Residence::  
Street of Mailing  
Address::  
City of Mailing Address::  
State or Province of Mailing Address::  
Country of Mailing Address::  
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: JANNE  
Middle Name::  
Family Name:: SALONEN  
City of Residence::  
State or Province of  
Residence::  
Country of Residence::  
Street of Mailing  
Address::  
City of Mailing Address::  
State or Province of Mailing Address::  
Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**Correspondence Information**

Correspondence Customer                    000466  
Number::

**Representative Information**

Representative Customer	000466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

**Assignment Information**

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::